EXECUTIVE LOBBYING EXPENDITURE REPORT FORM 507							
COVERING JANUARY 1 - JUNE 30 DUE AUGUST 15  COVERING JANUARY 1 - DECEMBER 31 DUE FEBRUARY 15							FOR OFFICE USE ONLY Postmark Date: 2/14/08 ER2(2/08)
Mail to: the Board of Et OR Fax to: (225)763-8787	hics, 2415 Quall Dr., 3rd F or (225)763-8780	koor, Baton F	touge, LA	70808		3	ERZEAN
(Hays)					24		
1. Name Hayes	Henry	First			М		3071057
	10533 Sugar Ma	ple Ave	nue. B	aton R		LA 70809	
2. Business Address;	Street and No.	P20 1310.	Clty		late .	Zip	
Mailing Address	Bame_		36				
3. Business Phone	225-202-8447		98	- 20			
9 9	Area Code and Te	lephone Numb	er				
4. Total of all execu-	tive lobbying expenditures	made January	1 through	June 30:	8	0.00	·
(Include expend)	pares from Schedules A and B)	r.					
5. Total of all execut	rive lobbying expenditures	made July 1 t	hrough De	vember 31	: <b>s</b> .	0.00	
(When Applicabl	e) (Include expenditures from	m Schedules A	and B)				***
6. Total of all execu	tive lobbying expenditures	made during	calendar y	ear:	\$	0.00	<u>:</u>
(Line 4 added to L	ine 5 should equal Line 6)						
						6288358	15 ii.
<ol><li>Did you make an</li></ol>	expenditure exceeding \$50	on one occas	ion for an	executive	branch o	fficial:	£y jay
From January 1	through June 307	Yes		No	×		<b>♀</b> ~
From July 1 thr	ough December 317	Yes		No	Z	NA L	27
If the answer to	either question in Number	7 above is YE	S, complet	e Scheduk	A and a	ttach.	
<ol><li>Did you make ex</li></ol>	penditures exceeding the sa	um of \$250 fo	r an execut	dve branci	i official;		
From January 1 t	hrough June 30?	Yes		No	· Z		
From July 1 thro	ugh Docember 31?	Yes		No	<b>X</b>	XA 🗌	
If the answer to o	either question in Number :	8 above is YE	S, complet	e Schedule	A and at	ttach.	
	funds for any reception, sec rited during this reporting p		, or other f	imeden to	which n	iore than twenty	r-five executive branch
	Yes		No	X	tiiss	ing numbe	ered pages were
If the answer to l	Number 9 above is YES. con	mplete Sched	ole 9 and a	ttach.			no information
				9502 <u>1</u> 70 85557	on th	iciir.	
Form 507, Re	w. 7/04	I	age 1 of	3			

2)	a. Name of Department and Individual Agency:	101
	b. Total of all expenditures made January 1 through June 30:	\$ <u>%</u>
	c. Total of all expenditures made July 1 through December 31: (When applicable)	<u>*</u>
	d. Total of all expenditures made during the calendar year:	\$
3>	a. Name of Department and Individual Agency.	
	b. Total of all expenditures made January 1 through June 30:	\$
	c. Total of all expenditures made July 1 through December 31: (When applicable)	<b>s</b>
	d. Total of all expenditures made during the calendar year:	<b>5</b>

## CERTIFICATION OF ACCURACY

I hereby certify that the information contained herein is true and correct to the best of my knowledge, information, and belief; that all reportable expenditures have been included herein; and that no information required by LSA-R.S. 49:71 et seq. has been deliberately omitted.

Herry Brun Hays